	PTO/SB/05 (08-03)
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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.	S0465/283640
First Inventor	ENDRES
Title	JOINT, ADAPTIVE CONTROL OF EQUALIZATION, SYNCHRONIZATION, AND GAIN IN A DIGITAL COMMUNICATIONS RECEIVER
Express Mail Label No.	EV333523913US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450					
1. Fee Transmittal Form (e.g., PTO/SB/17)	Alexandria VA 22313-1450					
(Submit an original and a duplicate for fee processing)  2. Applicant claims small entity status. See 37 CFR 1.27.  3. Specification [Total Pages (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D	<ol> <li>CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</li> <li>Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</li> <li>Computer Readable Form (CRF)</li> <li>Specification Sequence Listing on:         <ol> <li>CD-ROM or CD-R (2 copies); or</li> <li>Paper</li> <li>Statements verifying identity of above copies</li> </ol> </li> </ol>					
<ul> <li>Reference to sequence listing, a table, or a computer program listing appendix</li> </ul>	ACCOMPANYING APPLICATIONS PARTS					
- Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings ( if filed) - Detailed Description - Claim(s)	9. ☐ Assignment Papers (cover sheet & document(s))  10. ☐ 37 C.F.R. 3.73(b) Statement ☑ Power of (when there is an assignee) Attorney					
- Abstract of the Disclosure	11. English Translation Document (if applicable)					
4. Drawing(s) (35 U.S.C.113) [Total Sheets 13]  5. Oath or Declaration [Total Sheets 3]  a. Newly Unexecuted (original or copy)  b. Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76  18. If a CONTINUING APPLICATION, check appropriate box, and supply or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part Prior application information: Examiner  Examiner  [Continuation Examiner Examiner]						
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the is considered a part of the disclosure of the accompanying or divisional ap be relied upon when a portion has been inadvertently omitted from the sub	prior application, from which an oath or declaration is supplied under Box 5b, plication and is hereby incorporated by reference. The incorporation can only					
	NDENCE ADDRESS					
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Name						
Address State	7:0.4					
City State Country Telephone	Zip Code Fax					
Name (Print/Type) JAMES L. EVUNG, L	Registration No. (Attorney/Agent) 30,630					
Signature alma Cella	Date February 19, 2004					

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**FEE TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT	OF PAYMENT
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(\$) 394.00

Complete if Known					
Application Number	NEW				
Filing Date	FEBRUARY 19, 2004				
First Named Inventor	ENDRES				
Examiner Name					
Art Unit					
	004651000040				

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METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)							
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None			3. ADDITIONAL FEES								
Order  Deposit Account:			Large	Large Entity Small Entity							
Deposit				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee De	scription	Fee Paid	
Account 11-0855			1051	130	2051	65	Surcharge - late	filing fee or oath			
Number	Number				50	2052	25	Surcharge - late or cover sheet.	provisional filing fee		
Deposit Account Kilpatrick Stackton LLB			1053	130	1053	130	Non-English spe	cification			
Name	Account Kilpatrick Stockton LLP			1812	2,520	1812	2,520	For filing a reque	est for reexamination		
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☐ Charge fee(s) indicated below ☑ Credit any overpayments ☑ Charge any additional fee(s) during the pendency of this application			1805	1,840*	1805	1,840*	Requesting public Examiner action	ication of SIR after			
		ccept for the filing fe	e	1251	110	2251	55	Extension for rea	oly within first month		
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		sign filing fee		1402	330	2402	165	Filing a brief in s	upport of an appeal	,	
		ant filing fee		1403	290	2403	145	Request for oral	hearing		
1004 770 2	2004 385 Re	issue filing fee		1451	1,510	1451	1,510	Petition to institu	te a public use		
1005 160 2	2005 80 Pro	ovisional filling fee		1452	110	2452	55	Petition to revive	- unavoidable		
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2. EXTRA CLA	IM FEES FOR U	JTILITY AND REIS	SUE	1502	480	2502	240	Design issue fee		-	
		xtra Fee from	Fee	1503	640	2503	320	-	Plant issue fee		
		claims below	Paid	1460	130	1460	130		Petitions to the Commissioner		
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1202 18	2202 9	Claims in excess of 2	-	1810	770	2810	385		nal invention to be		
1201 86	2201 43	Independent claims in						examined (37 Cl	「ベ g 1.129(D))	<b>  </b>	
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SUBTOTAL (2) (\$) 394.00											
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**or number previously paid, if greater, For Reissues, see above				<u> </u>						<u> </u>	
SUBMITTED BY	/	1 1						Com	plete (if applicable)		
Name (Print/Type)  James L. Ewing, V  Registration No. (Attate)/Agent)					30	0,630		Telephone	404.815.6494		
Signature		MW HW	<u> ገሥ</u>					Date	February 19, 2	004	

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